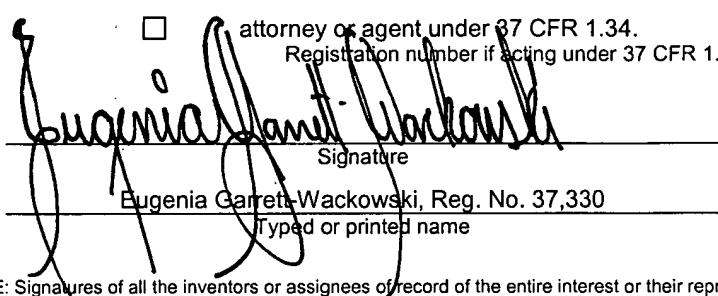




PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 016303-008110																		
FY 2005 (fees effective on or after October 1, 2004)																				
Application Number 09/839,707		Filed April 20, 2001																		
For METHODS OF ENHANCING SPLP-MEDIATED TRANSFECTION USING ENDOSOMAL MEMBRANE DESTABILIZERS																				
Art Unit 1632		Examiner Dave Trong Nguyen																		
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table> <thead> <tr> <th></th> <th style="text-align: right;"><u>Fee</u></th> <th style="text-align: right;"><u>Small Entity Fee</u></th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: right;">\$110</td> <td style="text-align: right;">\$55</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: right;">\$430</td> <td style="text-align: right;">\$215</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: right;">\$980</td> <td style="text-align: right;">\$490</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: right;">\$1530</td> <td style="text-align: right;">\$765</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: right;">\$2080</td> <td style="text-align: right;">\$1040</td> </tr> </tbody> </table> <p> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>20-1430</u>. I have enclosed a duplicate copy of this sheet. </p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>37,330</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____.</p> <p> _____ Signature Eugenia Garrett-Wackowski, Reg. No. 37,330 Typed or printed name</p> <p>10/26/04 _____ Date</p> <p>925-472-5000 _____ Telephone Number</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p>				<u>Fee</u>	<u>Small Entity Fee</u>	<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110	\$55	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$430	\$215	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$980	\$490	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1530	\$765	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2080	\$1040
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